UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: 2 Serial/Patent #/523403			
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$ 500
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			:\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
	7 TOTAL AMOUNT S 500		
	8 TO BE I	REFUNDED BY	Y:
10 REASON:	Treasury Check		
Overpayment	Credit Deposit A/C #:		
Duplicate Payment	, 041928		
No Fee Due (Explanation):			
1 REFUND REQUESTED BY:			
TYPED/PRINTED NAME:		TITLE:	
SIGNATURE:		PHONE:	
OFFICE:			
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED:	DATE:		
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

ORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B